



<< Name>>
<<ADDRESS line 1>>
<<CITY>>, <<State>> <<ZIP>>

*** Information only ***
*** No action needed ***
*** Save for your records ***

Michigan Child Support Enforcement System Assigned Support Statement

DHS Case Number: <<IV-A Case: number>>

Listed below are child support payments (by docket number) sent to you and the State of Michigan. Because you assigned your rights to support to the State of Michigan when you applied for assistance on your DHS case listed above, the state may continue to receive payments up to the total amount of cash benefits you received. You may also be receiving this statement if you have not received cash benefits, but you have a Medicaid case.

Collections/Payments Statement Period: <<mo/day/year to mo/day/year>>

Collection Month/Year	Current Amount Paid	Arrears Amount Paid	Support Paid To Family	Support Paid To State
Docket: <<number >> - County, IV-D Case ID: <<Number>>, Payer: <<Name>>				
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>
Docket: <<number >> - County, IV-D Case ID: <<Number>>, Payer: <<Name>>				
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>
<<mo/year>>	<<\$>>	<<\$>>	<<\$>>	<<\$>>

Note: The Current Amount Paid and the Arrears Amount Paid may not equal the Support Paid To Family and Support Paid To State because of money that may have been owed for fees, or money that was received but has not yet been sent to the state or to the family. Please write your Friend of the Court office if you have questions.

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

Legal Authorities: 45 CFR 302.54, Assigned Support Statement Criteria

This institution is an equal opportunity provider.